ANNUAL REPORT
Interagency Council for Coordinating Homeless Programs
(ICCHP)
November 2003 – November 2004

The Interagency Council for Coordinating Homeless Programs (ICCHP or Council) is an advisory group originally created by executive order in 1992 to advise the Governor and the Secretary of the North Carolina Department of Health and Human Services on issues affecting people who are homeless or at risk of becoming homeless. The Council is charged with providing recommendations for joint and cooperative efforts to better meet the needs of the homeless residents of North Carolina. The ICCHP is staffed by the N.C. Department of Health and Human Services (DHHS). In addition, a Homeless Policy Specialist, based within the DHHS and funded by DHHS along with the Department of Correction and the N.C. Housing Finance Agency, works with the Council and its member agencies on special initiatives aimed at ending homelessness in North Carolina.

The ICCHP consists of 29 members who are appointed by the Governor and represent non-profit agencies serving the homeless, county and city government, housing authorities, the private sector, the state departments of Administration, Commerce, Correction, Health and Human Services, Juvenile Justice and Delinquency Prevention, Public Instruction, State Planning, the Community Colleges System, the N.C. Housing Finance Agency and the North Carolina General Assembly. A seat on the Council is also reserved for a representative of homeless and/or formerly homeless people.

In addition to its appointed members, the Council also benefits from the participation of a number of agencies and organizations that attend Council meetings as "interested parties." The representatives of these agencies and organizations provide valuable input to the Council in its deliberations and often supply staff assistance with Council sponsored or endorsed activities. Current interested parties include representatives of the Office of Citizen Services, the Division of Aging, and the Division of Vocational Rehabilitation Services, all of the Department of Health and Human Services, the Department of Juvenile Justice and Delinquency Prevention, the N.C. Coalition against Domestic Violence, and the Greensboro Field Office of the U.S. Department of Housing and Urban Development (HUD).

Homelessness in North Carolina

In discussions about homelessness, the question always arises as to who is homeless. The most common definition (based on the U.S. Department of Housing and Urban Development's (HUD) McKinney-Vento Homeless Assistance Act) includes only those people who are literally homeless – that is, on the streets or in shelters – and people who face imminent eviction (within a week) from a private dwelling or institution and who have no subsequent residence or resources to obtain housing. Homeless service providers in North Carolina find that this definition works best in large, urban areas but has limitations in most communities, especially in rural areas. Communities without shelters find that households are more likely to live with relatives in overcrowded or substandard housing. Across all communities, however, a lack of decent affordable housing underlies both rural and urban homelessness.

In December, 2003, the ICCHP coordinated a statewide point-in-time count of homeless people. The Council asked willing homeless service agencies to enumerate the numbers of people served by their programs on December 15, and several communities augmented this information with a street count of people sleeping outside. In addition, when critical demographic or descriptive information was known, agencies were asked to report this information in aggregate form. Despite the fact that only roughly half of the counties in the state had any level of participation, this point-in-time survey documented almost 10,000 homeless people, both individuals and family members, on that one night count.
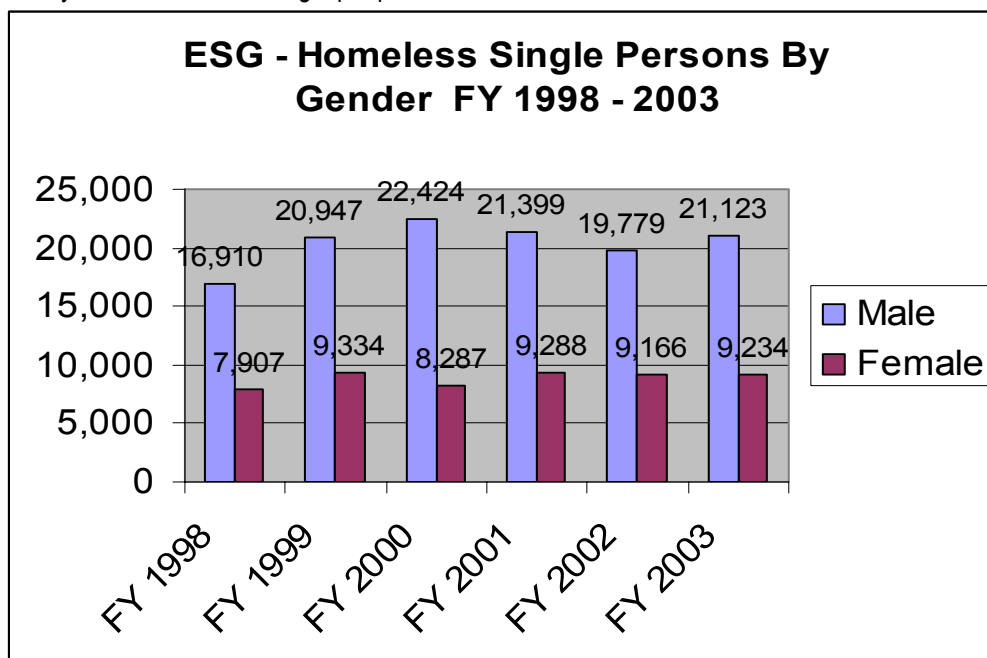
North Carolina
Statewide Point in Time Homeless Survey
December 15, 2003
Totals

GENERAL DESCRIPTORS

	Total	Domestic Violence	Un-sheltered	Veterans			Mental Illness[5]			Substance Abuse		
		Yes	Yes	Yes	No	Un-known	Diagnosed	None	Un-known	Yes	No	Unknown
Singles												
Unreported Gender	2753											
	2753			2753			2753					
Men	3724	88	870	615	1310	1799	469	978	2277	1577	444	1703
Women	1110	182	165	28	515	567	231	265	614	364	228	518
Youth – male	36	2	9				5	10	21	1	16	19
Youth – female	27	3	4				1	22	4	0	9	18
Sub - TOTAL	7650	275	1048	643	1825	5119	706	1275	5669	1942	697	5011
Families												
Adult, unreported gender	6					6			6			6
Men	119	4	15	17	29	73	8	35	76	26	36	57
Women	688	267	39	8	242	438	43	269	376	140	209	339
Child – unreported gender	102		102						102			102
Child – male	562	248	48				15	244	303	41	230	291
Child – female	560	228	38				9	208	343	38	189	333
Sub -TOTAL	2037	747	242	25	271	517	75	756	1206	245	664	1128
GRAND TOTAL	9687	1022	1290	668	2096	5636	781	2031	6875	2187	1361	6139

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DISCHARGED FROM?

	Total	Criminal Justice			Treatment Programs			Primary (Health) Care			Known Double-Ups
		Yes	No	Un-known	Yes	No	Un-known	Yes	No	Un-known	
Singles											
Unreported Gender	2753			2753			2753			2753	
Men	3724	765	1297	1662	646	1467	1611	259	1681	1784	448
Women	1110	112	362	636	211	340	559	99	423	588	189
Youth – male	36	2	16	18	1	16	19	1	16	19	5
Youth – female	27	1	9	17	0	9	18	3	7	17	6
Sub - TOTAL	7650	880	1684	5086	858	1832	4960	362	2127	5161	648
Families											
Adult, unreported gender	6			6			6			6	
Men	119	9	36	74	4	39	76	3	42	74	218
Women	688	33	208	447	41	223	424	20	284	384	342
Child – unreported gender	102			102			102			102	
Child – male	562	13	231	318	12	233	317	14	231	317	367
Child – female	560	12	198	350	13	205	342	14	197	349	337
Sub -TOTAL	2037	67	673	1297	70	700	1267	51	754	1232	1264
GRAND TOTAL	**9687**	**947**	**2357**	**6383**	**928**	**2532**	**6227**	**413**	**2881**	**6393**	**1912**

Another statewide Point-in-Time Survey will be completed in January 2005.

Other insights into the numbers of homeless people, and historical trends, can be obtained from the homeless service agency reports submitted to the Office of Economic Opportunity as part of their administration of the HUD Emergency Shelter Grants program. It should be noted that these individual agency reports, while unduplicated within each report, are not unduplicated between agencies. Even so, helpful information can be discerned from the aggregation of these individual reports.
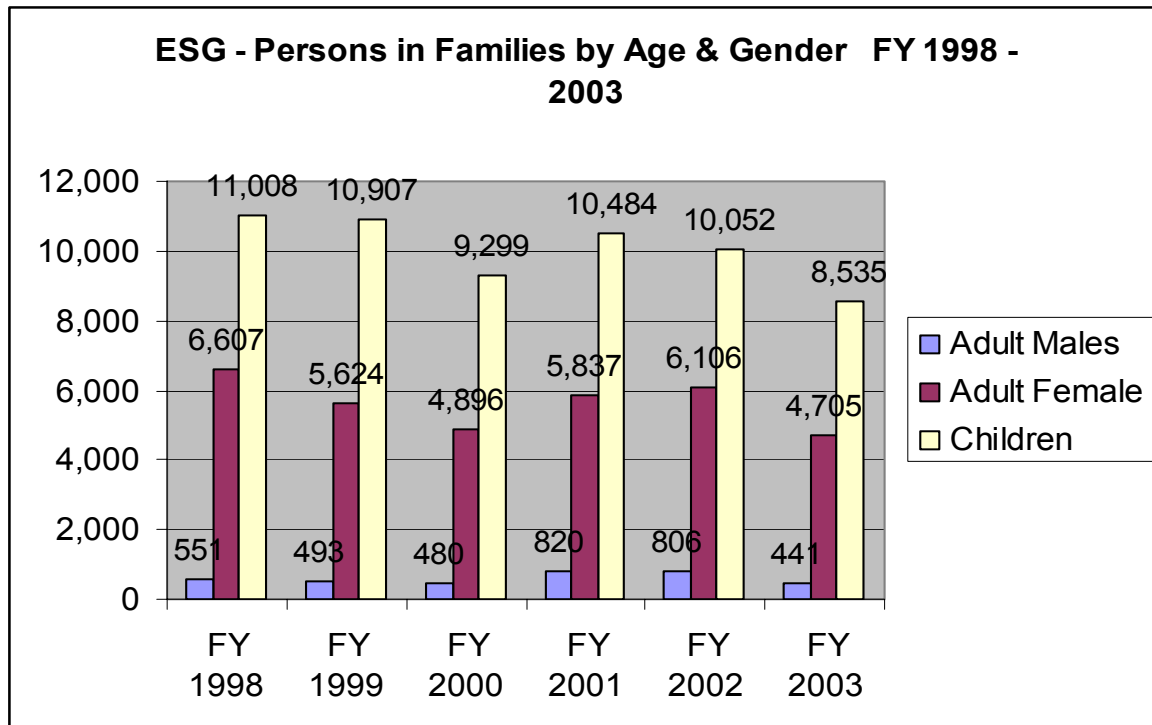
ESG- Persons Reported As Homeless FY 1998 - 2003

FY 1998	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003
43,057	47,475	45,389	47,834	45,909	44,038

As in past years, single homeless people age 18 and over make up the largest homeless sub-population in the State. Indeed, 69% of the people served by the State's Emergency Shelter Grants Program in state fiscal year 2003-04 were single people.

ESG - Homeless Single Persons By Gender FY 1998 - 2003

	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003
Male	16,910	20,947	22,424	21,399	19,779	21,123
Female	7,907	9,334	8,287	9,288	9,166	9,234

Of the 30,357 single people served during this past fiscal year, 70% were male and 30% were female.

Of the over 4,700 homeless families served by FY 2002 Emergency Shelter Grants (ESG) Program grantee organizations, the overwhelming majority were headed by females. Of the 13,681 family members served, 62% -- or 8,535 – were children ages birth to 17 years.

ESG - Persons in Families by Age & Gender   FY 1998 - 2003

	Adult Males	Adult Female	Children
FY 1998	551	6,607	11,008
FY 1999	493	5,624	10,907
FY 2000	480	4,896	9,299
FY 2001	820	5,837	10,484
FY 2002	806	6,106	10,052
FY 2003	441	4,705	8,535

Towards better data

The Council and its members have undertaken several initiatives aimed at improving the quantity and quality of data we have about our state's homeless population. First, as mentioned above, the Council coordinated a statewide point-in-time count. This count was the first time that homeless service agencies had been asked to begin documenting any links between people they serve and people who have been discharged from state systems and institutions. The Council anticipates increased participation, by more communities, and more agencies within participating communities in the upcoming count in January.

Second, the Council has facilitated a homeless management information system (HMIS) collaboration of homeless services from across the state. Congress has created a mandate, which HUD is implementing, requiring all agencies receiving HUD homeless assistance funds to participate in a homeless management information system (HMIS). Within our state, several communities, including Mecklenburg, Durham, Wake, Cumberland, Catawba, Gastonia Counties and the NW Regional Continuum of Care (Ashe, Alleghany, Watauga, Wilkes, Avery, Mitchell and Yancey Counties) have initiated their own local HMIS project. Agencies from remaining communities have joined together to develop an HMIS solution that will be accessible to communities across the state. This HMIS collaborative, called Carolina Homeless Information Network (CHIN), will likely merge with the Raleigh system in the near future, since both systems have selected the same software vendor. Furthermore, it is the intention of CHIN and the Council that this statewide HMIS will eventually aggregate information from across its own system as well as the

independent local systems that are already in place. Once operational, HMIS should be able to provide communities and our state with aggregate information about the numbers of people and households being served, produce basic demographic information, as well as document how long people are remaining homeless and where they go when they leave homeless programs. During this reporting year, the Council facilitated the creation of CHIN, assisted CHIN in developing an RFP for software vendor proposals, selecting a lead agency to implement the HMIS project for the next five years, and helped CHIN to begin identifying participating homeless service agencies. Over the next year, as CHIN becomes firmly established, the Council's facilitation role will be replaced with a role as board member for the nonprofit implementing the HMIS solution. In this new role the Council will be able to ensure that the State's data needs are addressed to the maximum degree possible through the statewide HMIS project.

Third, research in other states has documented the cost benefits of permanent supported housing for people who are experiencing homelessness or are at risk of homelessness. Specifically, these studies show that the tax dollars used to pay for supported housing (permanent housing with services in place) is less than the cost of paying for shelter and acute care interventions provided by the health care and criminal justice systems. This past year the Council contracted with the Jordan Institute to develop a research design that will document the cost benefits of permanent supported housing in North Carolina. The Council will now develop a strategy for funding this research.

During the next year the Council will undertake a fourth initiative, a point-in-time survey to be administered within institutions and designed to enumerate the numbers of people discharged from publicly funded systems into homelessness or other housing options that do not meet the client's income and service needs. This survey will provide an additional perspective on the homeless and at-risk population within North Carolina.

Fourth, the AIDS Care Unit has undertaken a statewide housing analysis in connection to the housing needs of people who are HIV+ or have AIDS. This report, which is currently in draft form, assesses housing circumstances, implications of inadequate housing, and makes recommendations for improving the housing circumstances of people who are HIV+. Due to the extreme needs of this population, and the limited housing resources, there is a strong connection between this population and people who are homeless or are at-risk of homelessness.

Finally, the Department of Correction has undertaken a study of homelessness among the offender population. Staff from the Office of Research & Planning designed a study to provide a description of homelessness in the offender population. Staff revised a previous survey and reviewed it with experts who work with homeless populations in North Carolina.

They administered the survey to a total of 1,816 offenders distributed among four groups. Due to missing data, there are 1,462 analyzable surveys with the following distribution:

Female Inmates:	387 (26%)
Male Inmates:	586 (40%)
Probationers at a Residential Substance Abuse Facility:	270 (19%)
Parolees at Residential Substance Abuse Facility:	219 (15%)

Inmates that were interviewed were either within 30 days of prison admission or within 6 months of release from prison. Probationers and parolees that were interviewed were residents at the DART-Cherry Residential Substance Abuse Program.

Overall, 31% of those surveyed said they had been homeless at some point in their lives. Of this homeless group, 40% stated that they had been homeless on one occasion and almost 59% had been homeless on

one or two occasions. Fifty-eight percent of the homeless stated that they were homeless for 6 months or less.

The average age of those surveyed is 33.6 years, the youngest is 16 and the eldest is 70. Military veterans comprised 9.4% of the survey respondents. Nearly half of the respondents indicated that they had never been married; 18% are married, 10% are separated, 19% are divorced, and 2% are widowed.

In the prison sample surveyed, women were 10% more likely to have been homeless than the men; 42% of the female prisoners answered that they had been homeless previously, while 32% of the male prisoners indicated that they had been homeless. For the DART-Cherry population, 21% of the probationers and 23% of the parolees indicated that they had been homeless, both groups being less likely to have been homeless than the male and female prisoners.

For those respondents who stated that they had been homeless, they were 37% less likely to be living in their own home/apartment prior to their incarceration or DART-Cherry treatment program than the never homeless group. The homeless group was 20% more likely to be living in some one else's home or apartment than the never homeless group.

For those respondents who stated that they had been homeless, they were 38% less likely to expect to be living in their own home/apartment after their incarceration or DART-Cherry treatment program than the never homeless group. The homeless group was 21% more likely not to know where they would be living after prison or DART-Cherry than the never homeless group.

Across all groups, the most frequently cited factors in their being homeless were drug/alcohol abuse, unemployment/lack of money, and criminal conviction. The most frequently cited services that offenders reported they will need include clothing assistance, employment training, drug/alcohol treatment, 12-step program, Medicaid/Medicare and vocational rehabilitation.

The study is limited in several ways. The data are self reported responses with no validity checking. These were convenience rather than random samples of the offender population. Since participation was voluntary, it is unknown whether those who took part are representative of the total homeless offender population. However, this survey provides new, descriptive information that policy-makers can use in assessing the needs of the homeless population.

In total, the Council is taking great strides in improving the quantity and quality of data that we have about homelessness in our State. We will continue this progress over the next year.

Working to end homelessness

Increasing the stock of permanent affordable rental housing, including supported housing, is the primary building block of any effort to end homelessness. For example, based on the federal minimum wage of $5.15/hour, and HUD's affordability standard of 30%, a single-wage household earning minimum wage can pay no more than $268 per month for housing and utilities before becoming cost burdened. The Fair Market Rent (rent for a less-than-average standard rental unit) for a two-bedroom unit, in 2003 dollars, is $603. The hourly wage needed to afford such a unit is $11.60. Moreover, according to the 2000 Census, over 130,000 North Carolina households receive Supplemental Security Income (SSI), with a mean annual income of $6,768 ($564 per month, or equivalent of $3.18 per hour if working a 40 hour work week). Thus, households receiving the mean SSI payment can afford to pay no more than $169 per month for housing expenses.
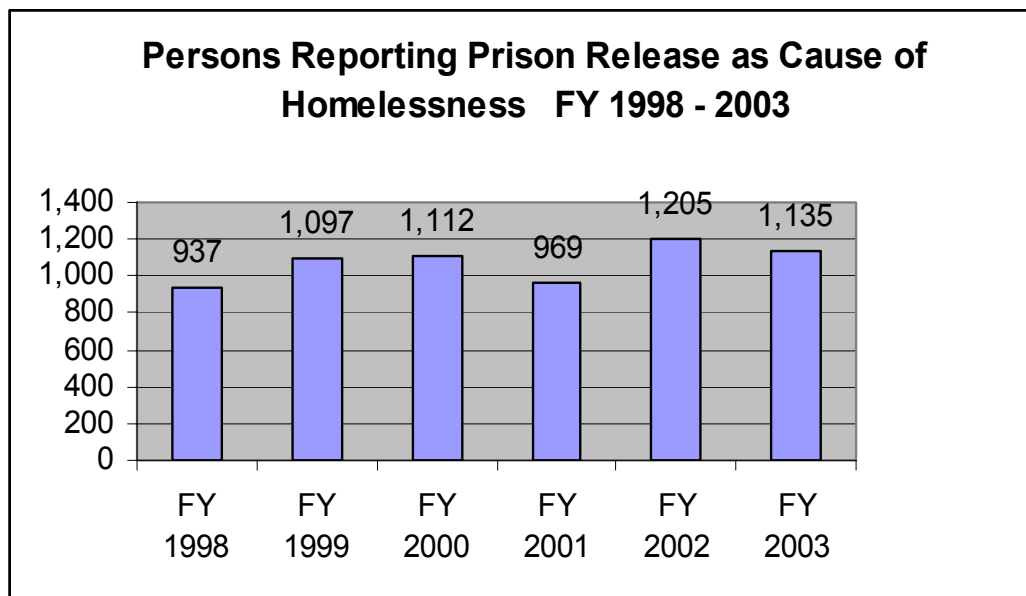
Unfortunately, North Carolina has very little safe housing available for rents less than $200 per month – the 2000 Census identified just over 52,000 housing units renting at this level (5.6% of the entire state's rental housing stock), and these units are most likely to be extremely sub-standard. There has been very limited production of rental units affordable to this income category by the mainstream resources (CDBG, HOME, Low-Income Housing Tax Credit program, etc.). Realistically – even if housing construction was completely grant funded, the cost of operating and maintaining housing is more than an individual on SSI can afford to pay. This reality forces any plan to end homelessness to acknowledge that by itself, the market cannot provide affordable housing to people in these extremely low-income ranges. Operating subsidies tied to development or rental assistance will be required to meet the housing needs of many homeless people – especially the long term homeless population.

A second cornerstone of ending homelessness is prevention. One arena of prevention is similar to the issues stated above – increasing the permanent affordable housing rental stock. Most low-income households live marginally, paying a large portion of their incomes for housing expenses, and are, therefore, at extreme risk of homelessness. Households paying more than 30% of their income for housing costs are considered to be cost burdened. According to the 2000 U.S. Census, 20% of all households in North Carolina, or almost 650,000 households, are cost-burdened.

Improved discharge planning provides another arena for homelessness prevention. Individuals released from various institutional facilities, without adequate discharge planning or discharge resources, constitute another substantial at-risk population. During the 2000 Census, 106,659 people were living in correctional facilities, mental hospitals, juvenile institutions, or other institutional settings. The majority of those institutionalized (59,421) were under 65 years of age.

Furthermore, the December 15, 2003 point-in-time survey found that there were 9,867 people identified as homeless, including 1,287 children. Of those able to provide descriptive information, 28 percent were listed as having been released from the criminal justice system, 27 percent from residential substance abuse and mental health treatment programs, and 12 percent from primary-treatment hospitals.

Similarly, the homeless shelters in North Carolina receiving funding through the Emergency Shelter Grants Program (ESG) report only on the number of people who state that release from prison is the cause of their homelessness (see chart).

Persons Reporting Prison Release as Cause of Homelessness   FY 1998 - 2003

FY 1998	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003
937	1,097	1,112	969	1,205	1,135

Identifying and addressing the causes of homelessness are important to prevent homelessness and to assist those households currently homeless. ICCHP initiatives in the next year aim to increase the priority placed by the State and its agencies on the needs of its homeless citizens.

Council Activities and Accomplishments in FY 2003-04

The member agencies and organizations of the Council have worked diligently over the last year to continue improving coordination and cooperation among not only state agencies and departments offering services for homeless people, but also between local and statewide nonprofit organizations and units of local government. The various member agencies of the Council have recommitted themselves to the original purposes of the Council and to the development of an effective state policy which will drastically reduce homelessness in North Carolina. A summary of the Council's most notable activities during the past year is provided below.

Homeless Policy Academies

The ICCHP coordinated North Carolina's participation in a federal initiative, Homeless Policy Academies sponsored by the U.S. Departments of Housing and Urban Development, Health and Human Services, and Veterans Affairs. The academies were designed to bring together state level policy makers to begin working plans to better address homelessness in their respective states. After ten years of the Department of Housing and Urban Development (HUD) directly funding the creation of local homeless service delivery systems, the current administration has shifted policy directions predicated on research that eliminating homelessness by providing integrated services and stable housing is, at minimum, cost neutral to accepting and accommodating homelessness. The Academies are among several initiatives aimed at involving state governments and better utilizing mainstream resources to address the growing problem of homelessness across the country. Two academies were being offered, one on addressing homelessness among families and another on the "chronically" homeless, defined as single individuals with disabling conditions that had experienced long term or repeating episodes of homelessness.

Developing a cohesive state plan to address homelessness is an opportunity to save tax dollars while simultaneously improving the quality of life by more effectively directing resources to those who are both most in need and most costly to the state when those needs are not met. Homelessness and the lack of residential stability for extremely low income households have a cost beyond the obvious one of individual lives in chaos. Because of homelessness, the state has increased costs for expensive emergency interventions in the arenas of health and mental health care, child and adult protective services, and the criminal justice system. Homelessness contributes to high recidivism in state prisons and high-priced institutional care for people with disabilities or long term illness.

In September of 2002, North Carolina was invited to send a team to a Policy Academy on Chronic Homelessness to be held in Atlanta in January 2003. In January 2004, North Carolina sent a team to the Policy Academy on Family Homelessness, held in Miami. As with the first Academy, the federal sponsors of the Academy had specified certain agencies that were to be represented on the North Carolina Team. Other Team members were chosen for their expertise and/or the importance of the participation of their agency in any effort to better address homelessness in North Carolina. The North Carolina Team included representatives from the Governor's Office; the Division of Social Services; the Division of Mental Health, Developmental Disabilities and Substance Abuse Services; the Division of Medical Assistance; the Board of Education; the N.C. Housing Finance Agency; the N.C. Legislature; the faith-based community; and the Secretary's Office at the Department of Health and Human Services.

By maximizing the expertise of the North Carolina team members, and learning from the other southern states participating in this second Policy Academy, the ICCHP was able to make further progress on creating a North Carolina 10 Year Plan to End Homelessness.

The N.C. 10 Year Plan to End Homelessness

The Council's draft 10 Year Plan builds on lessons learned from both Policy Academies, as well as data on program outcomes that Council members have researched. The 10 Year Plan highlights include a vision, mission, guiding principles, and goals.

Vision: End Homelessness in North Carolina

Mission:
North Carolina will significantly reduce the number of people experiencing homelessness across the state. We will accomplish this by:
- Pursuing aggressive prevention strategies; and
- Expanding access to safe, permanent affordable housing and coordinated support services, tailored to individual needs.

Guiding Principles:
- In an effort to maximize federal resources available to local communities, initial efforts will focus on federal priorities regarding people who have experienced chronic homelessness. Other priorities include homeless families, homeless young adults, victims of domestic violence, and people experiencing homelessness after discharge from publicly funded systems.
- We will work towards solutions that attempt to equitably balance the interests of the stakeholders involved.
- We will strive to find solutions that are realistic for our state.
- We will recommend solutions which have been proven elsewhere or which have a reasonable likelihood of being successful.
- We will maximize use of public and community resources.
- The ICCHP will assume overall responsibility for coordination of implementation of the plan.

Goals of the North Carolina 10 Year Plan to End Homelessness:
Increase state level commitment and leadership to ensure sustained political will for development and implementation of the N.C. Plan to end Homelessness: Meeting this goal will involve maximizing the support of key leadership in all arenas, at the state and local level.

Implement aggressive prevention strategies: Meeting this goal will involve discharge planning from publicly funded institutions as well as targeted assistance to cost-burdened households immediately at risk of homelessness.

Develop more Permanent Supported Housing: Meeting this goal will involve creation and preservation of housing units, partnered with appropriate services, targeted to households with extremely low incomes.

Local communities across N.C. will develop local 10 Year Plans to End Homelessness: At least 20 communities across the state will develop 10 Year Plans to End Homelessness that are compatible with and build upon the N.C. 10 Year Plan to End Homelessness.

Work Groups:
In some cases, the Council has had to identify a mechanism to refine strategies for the 10 Year Plan. For that process, the Council intends to use time-limited, topic oriented work-groups that will research specific issues and make policy and program recommendations to the Council.

Discharge Planning:
As stated above, there is a well researched connection between the back door of publicly funded systems, including jails, prisons, behavioral health institutions, primary care hospitals, foster care, and juvenile justice programs, and people served by the homeless service sector. In November 2003, Secretary Odom of the Department of Health and Human Services, Secretary Beck of the Department of Correction, and Secretary Sweat of the Department of Juvenile Justice and Delinquency Prevention convened a kickoff meeting of a Discharge Planning Work Group. By Summer 2004, this Work Group had completed preliminary recommendations for the Secretaries' and Council's review. A copy of the preliminary report is attached.

Employment:
In August 2004 the Council hosted the first meeting of an Employment Work Group. This Work Group will continue to meet for several months to further study the preliminary ideas about employment and homelessness that are documented in the draft 10 Year Plan and research programs within N.C. and other states. Ultimately, this Work Group will make programmatic and policy recommendations based on that research.

Local Plans:
The Council recognizes that many strategies for ending homelessness will have to be implemented at the local level. To that end, the Council has been encouraging the development of local 10 Year Plans across North Carolina. Over the past year, mayors and/or county executives from six North Carolina communities have made commitments to developing local plans. These communities include Asheville/Buncombe; Durham/Durham, Raleigh/Wake, Winston-Salem/Forsyth, Henderson, and Gastonia. Council representatives have been providing technical assistance to these communities, and continue to work with other communities that have not yet made official planning commitments.

Technical Assistance:
The Council identified that North Carolina communities were leaving up to $11M of federal homelessness assistance dollars on the table each year, primarily due to lack of local capacity to coordinate the application process and write the lengthy grant. This Continuum of Care application process requires substantial community participation in multiple tasks that go beyond a typical grant application. The Council provided technical assistance and grant writing assistance to four communities that had either never applied for these funds before, or had undergone significant changes in participation that threatened their ability to successfully apply for available funds. To that end, four new Continua of Care were established and applied for funding. These Continua are the Southwest Continuum of Care, which includes Cherokee, Clay, Graham, Haywood, Jackson, Macon, and Swain counties, the South Midwest Continua of Care, which includes Henderson, Polk, Rutherford, and Transylvania counties, the Iredell-Yadkin Continuum of Care, and the Rockingham, Caswell, Alamance Continuum of Care. Combined, these new Continua have applied for over $1,450,000 in funding this year. Grant award announcements are not expected until December 2004.

Seventh Annual North Carolina Conference on Homelessness

The Council sponsored its Seventh Annual North Carolina Conference on Homelessness December 2 and 3, 2003 at the Jane S. McKimmon Center in Raleigh. The Conference was attended by over 450 people from across the state representing non-profit homeless service providers, government agencies, the faith community, the homeless/formerly homeless and community volunteers. The Conference featured 25

workshops on such topics as supportive housing development, education for homeless children and youth, housing funding sources, mental health reform, employment programs for the homeless, case management and outreach services, programs for homeless veterans and how communities may develop a ten-year plan to end homelessness. Secretary Carmen Hooker Odom of the N.C. Department of the Health and Human Services addressed conference participants at the conference opening session on December 2. Philip Mangano, Executive Director of the U.S. Interagency Council on Homelessness, addressed conference attendees later that day during the conference luncheon. To conclude the conference, the ICCHP presented its annual Awards of Excellence during a luncheon held December 3. These awards honored those civic organizations, businesses, and volunteers that have provided outstanding service to the State's homeless people over a number of years. In addition, a formerly homeless individual who had successfully achieved stability was also honored with an award. Other special events held during the conference included a participant networking dinner, a released offender housing caucus and the annual membership meeting of the North Carolina Coalition to End Homelessness.

Quarterly Meetings

Since November of 2003, the ICCHP has held quarterly meetings on January 14, 2004, April 14, 2004, July 9, 2004, and October 13, 2004. The following is a brief summary of these quarterly meetings.

January 14, 2004

- The Council received a report on the 2003 Homeless Conference.
- The Council was updated on:
    - The December 15, 2003 statewide homeless point-in-time count.
    - Initial work to support the establishment of a statewide Homeless Management Information System (HMIS)
    - Work of the Discharge Planning Work Group
    - Mayoral endorsements of 10 Year Plans by Raleigh and Gastonia
- The Council discussed the executive order that had expired was being renewed. The Council decided to request that the order eliminate the seat for the Department of Cultural Resources and one of the seats for the private sector and add a seat for the Department of Juvenile Justice and Delinquency Prevention and for public housing authorities. In addition, the Council requested the creation of an additional seat for the Office of Economic Opportunity.
- The Council received a report on federal funds awarded to N.C. for the federal year 2003.
    - $11,153,158 in Continuum of Care funds, used for Supportive Housing Programs and Shelter Plus Care projects.
    - $3,003,573 for Emergency Shelter Grants.
- The Supportive Housing Development Program of the N.C. Housing Finance Agency will provide up to $2 M for production of transitional and permanent housing with supportive services.
- The State Housing Opportunities for Persons Living with HIV/AIDS (HOPWA) Program will conduct the first statewide housing needs assessment of people living with HIV/AIDS in North Carolina.
- As part of the Going Home initiative within the Department of Correction, a working group has held a series of information-sharing meetings across the state to identify resources for agencies interested in expanding or developing housing for ex-offenders.
- The Department of Correction's Office for Research and Planning is conducting an ongoing study of the causes of homelessness among ex-inmates.

April 14, 2003

- New Council members Janet Jacobs McLamb, from the Office of Economic Opportunity, and Larry Dix, from the Department of Juveniles Justice and Delinquency Prevention, were sworn in.
- Dr, Steve Keifer presented the Council with a preliminary report of the Department of Correction's research on homelessness among ex-offenders.
- The Council reviewed and made comments on the draft 10 Year Plan. Council members were specifically asked to note their assignments for specific action steps in the Plan.
- The Department of Correction has participated in a panel discussion about discharge planning held at N.C. State University.

July 14, 2003

- The Council again reviewed the latest version of the draft 10 Year Plan, and discussed strategies for a public comment period.
- The Council received updates on activities of the statewide HMIS collaborative, which has taken the name Carolina Homeless Information Network (CHIN).
- The Council received copies of the Preliminary Report on Discharge Planning.
- The Council was updated on the technical assistance being provided to new Continua of Care.
- Six mayors and four county chairs have committed to doing local plans to end homelessness.
- The Emergency Shelter Grants program began July 1 and the Office of Economic Opportunities is administering $2,359,410 through that program.
- Planning has begun for the Eighth Annual N.C. Conference on Homelessness, to be held November 30 – December 1, 2004.
- The AIDS Care Unit continues its surveys of housing needs for people living with HIV/AIDS.
- Secretary Beck submitted an article on DOC's involvement in the ICCHP and its commitment to ending homelessness in North Carolina to the State Corrections Administrators Association for inclusion in a national publication on best practices.
- The N.C. Housing Finance Agency is offering a free one-day development workshop for nonprofits and local governments interested in developing supported housing.
- The Department of Public Instruction (DPI) will be administering about $40,000 in McKinney-Vento Department of Education funding through a competitive grant cycle in the fall.
- Council members were asked to provide feedback on DPI's proposed reporting form for homeless liaisons within the local school districts.
- The N.C. Housing Coalition is developing a piece of legislation to help with the rising foreclosure rates in our state.
- A grant from the Fannie Mae Foundation will be used to develop a housing resource manual, including information about NIMBY and dealing with local processes.
- The AJ Fletcher Foundation has adopted the Housing Trust Fund as their advocacy issue to work on this year.
- The N.C. Coalition to End Homelessness will be facilitating homeless voter registration in Wake County, Greensboro and Charlotte.

October 13, 2004

- The Council learned of the successful Center for Medicaid/Medicare Services 2004 Real Choice System Change Grant awarded to DHHS.
- The Council briefly reviewed the annual report to the Governor.
- The Council received an update on the Carolina Homeless Information Network.

- Representatives of the Discharge Planning Work Group spoke briefly of the technical assistance trip to Boston.
- The group was updated on activities of the new Employment and Homelessness Work Group.
- As part of the effort to maximize access to federal funds, staff is assisting three new communities to explore developing Continua of Care.
- The Council was reminded of the upcoming Eighth Annual Conference on Homelessness.
- The Council received a statistical summary of Emergency Shelter Grants reports from FY 2003-2004.
- Copies of the first Supportive Housing Bulletin from the N.C. Housing Finance Agency were distributed.
- The Department of Public Instruction will make its homeless coordination position a full-time position.
- DPI is exploring issues related to the schools and mental health centers. One possibility is to expand school mental health programs.

Council Plans for 2004-2005

- The Council will sponsor its Eighth Annual North Carolina Conference on Homelessness on November 30 and December 1, 2003 at the Jane S. McKimmon Center in Raleigh, North Carolina. The conference theme will be "Getting There From Here: Mapping Solutions to End Homelessness in North Carolina." It is anticipated that approximately 400 people will attend the conference which will feature more than 25 workshops on topics of interest to homeless service and shelter providers. Barbara Sard, from the Center for Budget and Policy Priorities, will be a featured speaker. In addition, formerly homeless people will share their stories in a plenary session. Special conference events will include homeless service provider exhibits, a presentation of the draft 10 Year Plan and a participant networking dinner.
- The Council will continue partnering with the N.C. Coalition to End Homelessness to develop and begin implementation of a 10 year plan to end homelessness. The Council will make a draft version of the plan available for public comment, and conduct numerous focus groups to solicit feedback from private and public sector stakeholders.
- The Council will provide technical assistance to new Continua of Care seeking to apply for untapped federal homeless assistance dollars.
- The Council will continue to provide technical assistance to local communities developing 10 Year Plans to End Homelessness.
- The Council will conduct a statewide homeless point-in-time count during the last week of January, 2005.
- The Council will conduct a statewide point-in-time survey of housing options at discharge from publicly funded systems.
- The Council will continue to support the Carolina Homeless Information Network (CHIN), facilitating the development of a voluntary statewide collaborative Homeless Management Information System (HMIS).
- In 2004, Council quarterly meetings will be held on January 12, April 13, July 13, and October 12.

MEMBERS
INTERAGENCY COUNCIL FOR COORDINATING HOMELESS PROGRAM
(As of November 1, 2003)

Member	Representing
Linda Povlich, Chairperson	NC Department of Health and Human Services
Gene Bell	Housing Authorities
Bert Bennett, Ph.D.	Division of Mental Health, Developmental Disabilities and Substance Abuse Services, DHHS
Loretta Braswell	City Government (Rocky Mount)
Arthur Clark	NC Department of Correction
Sue Perry Cole	NC Association of Community Development Corporations, Inc.
Senator Charlie Smith Dannelly	NC Senate
Joshua D. Diem	NC Coalition to End Homelessness
Larry Dix	NC Department of Juvenile Justice and Delinquency Prevention
C. William Dowse	NC Housing Finance Agency
Representative Beverly M. Earle	NC House of Representative
Chris Estes	NC Low Income Housing Coalition
Lori Hines Hartsfield	County Government (Pitt County)
Phyllis Cochran Johnson	AIDS Care Unit, DHHS
Janet Jacobs McLamb	Office of Economic Opportunity, DHHS
Debra McHenry	NC Department of Public Instruction
Debra King	Community Alternatives to Supportive Abodes, Inc.
Senator Eleanor Kinnaird	NC Senate
Sam McLean	Program Consumers
Representative Paul Miller	NC House of Representatives
Tina Quiller-Morgan	Office of State Budget and Management
Dennis Parnell	The Healing Place of Wake County
Senator Eric Reeves	NC Senate
Cleveland Simpson	NC Department of Commerce
Sillar G. Smith	NC Community College System
Lane Sarver	Private Sector
Leslie Starsoneck	NC Department of Administration
Representative Edith Warren	NC House of Representatives
Jean Williams, Ph.D.	Women's Center of Wake County, Inc.

Interested Parties

Interested Parties	Representing
Sara Allen	Boards and Commissions, Office of the Governor
Martha Are	Office of the Secretary, DHHS
Julia Bick	Office of the Secretary, DHHS
Nancy Evans	Division of Aging, DHHS
Kay Ferguson	Wake County Human Services
Gloria Winston Holloway	The McAuley Institute
Michael Leach	Office of Citizen Services, DHHS
Andrea Schmidt	Department of Housing and Urban Development
Mary Beth Loucks-Sorrells	NC Coalition Against Domestic Violence
Georgia Steele	Division of Vocational Rehabilitation Services

Council Staff

Amanda Parks	Office of the Secretary, DHHS

Attachment I

Discharge Planning – Preliminary Report
ICCHP Discharge Planning Work Group
June 2004

The Need

The N.C. Interagency Council for Coordinating Homeless Programs (ICCHP or Council) has committed to developing a N.C. 10-Year Plan to End Homelessness. Although the Council has not yet completed its Plan, it has begun the process of exploring national research about homelessness. That data has documented a connection between extremely low income people who are discharged from publicly funded systems/institutions and people who are in homeless service systems. Council members associated with these institutions felt that this national data was consistent with their own experiences. The Council determined that the relationship between institutions and homeless systems was critical and costly to the State and local communities and therefore, it was imperative to begin exploring discharge policies immediately. To that end, and with the support of the Secretary of the Departments of Health and Human Services, Correction, and Juvenile Justice and Delinquency Prevention, the Council established the Discharge Planning Work Group.

Process to Date

In November 2003 the Council hosted its first meeting of the Discharge Planning Work Group (DPWG). This initial meeting was convened with Secretary Odom, Secretary Beck, and Secretary Sweat. The DPWG membership includes representation from the Departments of Correction, Health and Human Services, Juvenile Justice and Delinquency Prevention, the Housing Finance Agency and the Department of Commerce's Division of Community Assistance. In addition, there is representation from the N.C. Sheriff/Jail Administrator's Association and the N.C. Hospital Association. The participation of these two non-state agencies was solicited since they are publicly funded and struggle with the same discharge issues as the state systems. The Work Group also sought, but was not successful in garnering, the participation of the Veteran's Association Medical Centers. However, key leadership from that system has pledged its support and will participate in the refinement of the recommendations from the DPWG.

Since its inaugural meeting in November, the DPWG has met five times. In those sessions the Work Group has explored connections between institutional data systems, policies, and practices and homelessness. The Work Group assessed how well institutional data systems were tracking homeless and housing status at intake and exit, the strengths and weaknesses of institutional staff awareness of community resources, and the best discharge practices from within North Carolina and other states.

The Work Group is aware that the context for discharge varies from system to system, institution to institution, and client to client. Some clients or detainees have lengthy

institutionalizations, while others spend only hours or days under care or incarceration. As a whole the Group acknowledged that effective discharge planning for short-term stays is, as a rule, much more difficult than finding appropriate placements for clients with longer stays. These case by case variations are part of the reason for the wide variety of Work Group recommendations.

Preliminary Recommendations

The DPWG has developed several preliminary recommendations for improved discharged planning that will result in fewer discharges resulting in homelessness. Those recommendations fall into categories of process, technology, data, training, and resources.

To prioritize recommendations, the Work Group followed a process of estimating impact and feasibility. The Group ranked each recommendation, both by how much impact it would make if implemented, as well as how difficult implementation would likely be. After that exercise, the DPWG engaged in a separate exercise to determine initial priorities. A summary of the recommendations, prioritized within each category, are found at the end of this document.

Next Steps

The DPWG has two significant activities to complete before submitting its final recommendations. First, the Work Group will conduct focus groups across the state. These focus groups will fall into three categories.
1) Conversations with homeless services front line staff.
2) Conversations with institution/system discharge workers.
3) Conversations with people who are about to be released, or who have recently been released from publicly funded systems.

The insights and information we receive from these focus groups will further refine the Work Group's recommendations.

Second, some Work Group participants will participate in an exploratory visit to the State of Massachusetts. Massachusetts was the first state to develop a "Zero Discharge into Homelessness" policy. Indeed, many of the recommendations developed by the DPWG are similar to or modeled after policies put into place in Massachusetts. The DPWG will meet with administrative staff from Massachusetts to gather further information about how policies have been put into practice, the challenges and successes.

After completing these activities the DPWG will revise its recommendations and submit a final report to the Secretaries.

Preliminary Recommendations
(Prioritized within Categories)

Process Recommendations

Discharge Planning Begins at Intake
At the point of admission into a system(s), intake process should gather information that can help identify people who will be at greatest risk of homelessness post-discharge and additional information that can be used to create a homelessness-prevention discharge plan. For example, risk factors, special needs, resources already available to or accessed by the client, as well as income support and support services for which the client is eligible but has not obtained should all be identified and tracked. Using this information, each discharge plan will address housing and services needed for the individual to maintain stability and ensure that the individual is receiving all entitlements for which they are eligible.

Community Partners Engaged Early and Fully
Community partners will be actively engaged in the discharge process to the maximum degree possible, at the earliest point possible. Community resources, especially but not exclusively residential options, can better prepare for and accommodate post-release needs if a relationship with the client has already been established prior to release. Community agencies and publicly funded institutions should be responsible for communication and follow through to ensure that services and supports are provided.

Housing Specialist - Development
Systems and institutions, and potentially partnerships between these systems, should build their knowledge base about available housing resources for people being discharged and participate in efforts to facilitate development of those resources.

Multi-sector Discharge Teams with Contractual Relationships
The concept builds on the above recommendation about involving community partners early in the discharge planning process. It takes this recommendation a step further by establishing discharge planning teams that include institutional representatives, community representatives, the consumer, and any known social support system. Other states have gone so far as to establish community-based case managers as team leaders. Discharge plans are written in the form of a contract between the consumer, institution, community services, and other community representatives.

Multiple Plans for High Risk Clients
By using data and research currently available, state systems could begin to identify a large percentage of residents who are most at risk of homelessness post discharge. At a minimum, those people who enter our systems homeless are at extreme risk of homelessness at exit. Clients who are identified as having a high risk of homelessness should have more than one discharge plan upon exit. This policy would better prepare institutional staff and community partners to make quick adjustments if the original plan does not work as intended, yet would reduce the risk of costly re-institutionalization.

Re-entry Support Groups
Institutions will work with community partners to establish Re-entry Peer Support programs, facilitated or peer-to-peer, that can assist post-release clients with emotional and practical support.

Housing Specialist – Available Units
These staff would be responsible for knowing about available market, subsidized and supported housing that is available/accessible to people being discharged from institutions. In general, institutional staff acknowledge that it is easier for them to obtain information about available services than available housing. These Specialists would help bridge that critical gap in discharge staff knowledge.

Non-compliance Community Support Facilities
Despite best efforts, there will be people who will not comply with discharge plans. Some people will stop taking needed medications, others will start consuming alcohol and drugs. Communities that anticipate these scenarios, providing Safe Havens, outreach, jail diversion and other non-institutional transitional or long-term care, will be best prepared to reduce homelessness and recidivism.

Research Best Practices
Ending discharge into homelessness is still a fairly new policy and practice in this nation. As more States invest energies into eliminating discharge into homelessness, news information about best practices will become available. North Carolina should be intentional about continuing to monitor new developments and recommendations from within and outside of our state borders.

Technology Recommendations

Online Housing Search Tools
As named above, despite the relative scarcity of appropriate services, discharge workers struggle the most with identifying appropriate units that are available to clients the day of discharge. An online search tool that allows discharge staff, or clients themselves, to seek for units that are ready for rental, and meet other criteria, such as on a bus line, accepting Section 8, or handicapped accessible, and provides landlord contact information would be a tremendous help. This tool would track not only supported housing options, but other private sector, market housing.

Homeless Management Information System(s)
By Congressional mandate, homeless service agencies are now required to participate in Homeless Management Information Systems (HMIS) if they want to continue receiving federal funding for their programs. As a result, six local communities are developing or implementing HMIS solutions, and the ICCHP is facilitating the remaining communities partnering together to provide a single-vendor solution for the remainder of the state. Among other things, these systems would allow institutional case managers/discharge workers with proper consent to access information about homeless status, services received, case management practices, and to make on-line referrals for post-release services.

Data Recommendations

Tracking Predictors
State data bases would begin to track homeless status, and other predicting data, both aggregately and longitudinally. This information will be used by discharge workers to target interventions to people most at risk of homelessness. The information could also be used to refine cost-benefit analysis of community interventions and services that target the homeless population. As new research identifying predictors of homelessness becomes available, that information would be used to further enhance assessment tools and data bases, leading to improved evaluation and recommendations regarding client needs.

Evaluate Outcomes to Identify Best Practices
Institutions would track known exit data, and especially by comparing it with improved intake information, systems would continuously evaluate the outcomes of re-entry initiatives. Best practices would be identified and proliferated.

Ongoing research of predictors
As with new research about interventions, new research that identifies predictors of homelessness is also becoming available. North Carolina should continue to monitor that research, and incorporate key data elements into our own data systems if they would significantly improve the ability to identify people at greatest risk of homelessness post discharge.

Training Recommendations

Cross Training between Institutions and Community Agencies
Publicly funded systems and the nonprofit homeless service delivery system operate with substantially different organizational cultures, funding requirements, and agency protocols. Institutions that can facilitate cross-training opportunities between discharge workers and community agencies will see improved working relationships leading to improved discharge planning for exiting clients.

Resource Recommendations

Pursue Targeted Federal Resources
North Carolina should aggressively pursue all federal funding available for homelessness prevention connected to publicly funded systems. This includes homeless assistance dollars, re-entry funds, support for treatment programs, and any other potential federal mainstream or targeted funding streams.

Expand State Limits to Meet Federal Limits for Services Funding
Research is showing that most of the people who experience homelessness for the longest period of time are people with special needs, people who require services linked to affordable housing. Best practices for homeless prevention frequently focus on maximizing access to mainstream services by people who are at greatest risk of homelessness. This can be done in part by expanding state regulations regarding access to

mainstream services to the level allowed by federal regulations. One specific example is to suspend, rather than stop, Medicaid eligibility for people who are incarcerated and allowing foster care programs. A second example involves raising the age for support services funding for children exiting foster care, from 18 to 21, and in some cases, 24.

Explore and Advocate Regarding Statutory and Regulatory Barriers
In some cases laws and regulations limit access to housing and support services by those most in need, whether intentionally or, more likely, unintentionally. North Carolina should remain committed to identifying and eliminating these statutory and regulatory barriers from all levels of government.

Incentives for Outcomes
Agencies that have contractual responsibility for providing residential services, particularly but not exclusively mental health and substance abuse services, should have incentives built into their contracts. These incentives should be connected to documented outcomes related decreasing tolerance of discharge into homelessness.

Full Participation in State Housing Plans
The State has to submit a Consolidated (Housing) Plan to HUD before it receives HOME, Community Development Block Grant (CDBG), Emergency Shelter Grant (ESG), or Housing Opportunities for Persons with AIDS (HOPWA) funding. Likewise, entitlement communities also submit plans before receiving their funding. These plans outline housing priorities and how funds will be used to meet those priorities. Publicly funded systems should engage in processes to determine the quantity of supported and other housing needed by people exiting their systems, and ensure that those needs are reflected in all state housing plans.

Full Participation in State Service and Income Support Plans
A key building block of homeless prevention is ensuring that eligible individuals access mainstream services, employment services, and income supports for which they are eligible. All residential publicly funded institutions should fully participate in State plans for how these resources are administered, ensuring that people to be discharged have maximum access to resources for which they are eligible.

Pursue Private Funding Resources
In addition to federal funding, North Carolina should be aggressive in pursuing any private funding that can be used to increase the effectiveness of discharge planning and reduce the numbers of people experiencing homelessness after discharge.

ATTACHMENT 2 - Increasing Stock of Supported Housing

One of the greatest challenges for the creation of supported housing is identifying funding sources for housing that can be targeted to the homeless population, or to households at less than 30% of area median income. Funds that are specifically targeted for homeless people are available through the federal McKinney-Vento Act appropriations. The following chart illustrates the funding available to North Carolina.

Program	Federal Department	Competitive or Grant	NC Administrating Agency	2002 Awards	2003 Awards	2004 Awards	Notes
Emergency Shelter Grants (ESG)	U.S. Department of Housing and Urban Development (HUD)	Formula grant funding	State: Office of Economic Opportunity – DHHS Entitlements: City or County Government	State: 2,325,000 Entitlement: 250,000 Total: 2,575,000	State: 2,340,000 Entitlement: 249,000 Total: 2,589,000	State: 2,359,410 Entitlements: 644,163 Total: 3,005,573	These funds primary support operating costs at shelters and transitional houses. To a lesser degree, they are used to fund services and homelessness prevention.
Homeless Assistance Grants – Continuum of Care (Supportive Housing, Shelter Plus Care, SRO Moderate Rehabilitation)	U.S. Department of Housing and Urban Development (HUD)	Competitive	Local nonprofits or units of government apply directly to HUD	10,340,216	11,153,158	These award announcements are expected in December 2004	
Veterans Grants and Per Diem Program	U.S. Department of Veterans Affairs Health Care for Homeless Veterans Programs	Competitive	Community Based Agencies apply directly to the VA	302,494	Per Diem: 571,000 Capital: 527,393	Per Diem: 914,584 Capital: 506,658	Capital grants were not offered in 2002

Other mainstream housing programs can be used for supported housing for homeless people, but have other eligible activities. Even so, it is important that North Carolina explore the appropriate use of these funds as they related to homeless people and programs serving homeless people.

Program	Funding Source	Purpose/ Targeted Use of Funds	Competitive, Block Grant, or other	Administered By	2003 Allocation	2004 Allocation	Notes
Housing Trust Fund	NC Appropriation	Housing	Nonprofits, units of local government, or for-profit developers compete	Housing Finance Agency	3,000,000	3,000,000	In recent years roughly 50% of the HTF dollars have been used for the Supportive Housing Program. Of those, in 2003, approximately 40% of the funds were awarded to agencies serving the homeless population. (Other HTF dollars are used for the Rental Production Program, which also produces some rental housing for homeless people.)
Community Development Block Grants	U.S. Department of Housing and Urban Development	Develop viable urban communities by providing decent housing and a suitable living environment, and by expanding economic opportunities, principally for low- and moderate-income people.	Block Grant to States and Entitlement Communities	State: Division of Community Assistance, Department of Commerce Entitlements: City or County Government	State: 50,704,000 Entitlement: 31,423,000 Total: 82,127,000	State: 52,465,304 Entitlement: 30,932,000 Total: 83,397,304	

Program	Funding Source	Purpose/ Targeted Use of Funds	Competitive, Block Grant, or other	Administered By	2003 Allocation	2004 Allocation	Notes
HOME Program	U.S. Department of Housing and Urban Development (HUD)	Building, buying, rehabilitation affordable housing; rental assistance	Block Grant to States and Entitlement Communities	State: Housing Finance Agency Entitlements: City or County Government	State: 21,010,000 Entitlements: 20,749,810 Total: 41,759,810	State: 21,526,782 Entitlements: 20,501,875 Total: 42,028,657	This year HFA is making some HOME funds available as a cash match to communities applying for McKinney-Vento Continuum of Care Grants through the Supportive Housing Program.
Public Housing Operating Subsidies	U.S. Department of Housing and Urban Development (HUD)	Rental housing, ongoing expenses	Formula Grant	Housing Authorities	91,995,270	100,140,349	
Public Housing Capital Funds	U.S. Department of Housing and Urban Development (HUD)	Capital improvements, maintenance, or development	Formula Grant	Housing Authorities	61,290,027	60,365,484	
HOPE VI	U.S. Department of Housing and Urban Development	Demolition of existing public housing, replacement	Competitive	Housing Authorities	45,166,708	not yet announced	

Program	Funding Source	Purpose/ Targeted Use of Funds	Competitive, Block Grant, or other	Administered By	2003 Allocation	2004 Allocation	Notes
Housing Choice Voucher Program	U.S. Department of Housing and Urban Development (HUD)	Rental Assistance	Formula Grant	Public Housing Authorities	277,064,046	294,712,840	A limited set aside of vouchers were awarded in a competitive process, a joint project with the Department of Veterans Administration, targeted to homeless veterans.
Low Income Housing Tax Credits	Credit on taxes owed to the Department of Revenue	Construct or substantially rehabilitate low income housing developments	Competitive. Projects receiving federal tax credits can apply for state credits.	NC Housing Finance Agency in conjunction with the Department of Revenue	Estimated Equity generated from State and Federal Credits allocated: 158,625,000	Estimated Equity generated from State and Federal Credits allocated: 156,794,000	Starting 2004, 10% of funded units must be made accessible to people at SSI level income. For 2004, this translated into 244 units
USDA Section 515	US Department of Agriculture – Rural Development	Loan funds for creation of multi family housing for very low-, low- and moderate-income families, the elderly and people with disabilities.	Rural Development State Directors use needs criteria to establish list of targeted communities - competitive within those communities	State Rural Development Directors and the Rural Housing Services Office		Combined for 2003 and 2004: 3,903,297	These funds have been for repair or subsequent loans – no new project funding available
USDA Rental Assistance	US Department of Agriculture- Rural Development	Rental Assistance, tied to Section 515 units	Competitive	State Rural Development Directors & the Rural Housing Services Office	31,787,499	36,682,640	

Program	Funding Source	Purpose/ Targeted Use of Funds	Competitive, Block Grant, or other	Administered By	2003 Allocation	2004 Allocation	Notes
Housing Opportunities for Persons with AIDS (HOPWA)	HIV/AIDS Housing Office within U.S. Department of Housing and Urban Development (HUD)	Housing assistance and related support services	Formula Grant Funding	State: HIV/STD Prevention and Care Branch in the N.C. Department of Health and Human Services Entitlements: City or County Government	State: 1,293,000 Entitlement: 1,533,000 Total: 2,826,000	State: 2,082,000 Entitlements: 923,000 Total: 3,005,000	Funds allocated to the State are currently being used to renew existing projects.
Section 811 Supportive Housing for Persons with Disabilities	U.S. Department of Housing and Urban Development	Interest-free capital advances and rental assistance	Competitive	Nonprofits apply directly to HUD	7,623,100	Capital Advances: 4,291,900 Rental Subsidy: 725,500	
Section 202 Supportive Housing for the Elderly	U.S. Department of Housing and Urban Development	Interest-free capital advances and rental assistance	Competitive	Nonprofits apply directly to HUD	16,175,700	Capital Advances: 16,505,500 Rental Subsidy: 2,584,000	

SERVICES FUNDING

As with housing, North Carolina must also explore use of available funding for services and income supports. As with above, we begin by identifying funds that are targeted for the homeless population.

Program	Funding Source	Purpose/ Targeted Use of Funds	Competitive Block Grant, or other	Administered By	2003 Allocation	2004 Allocation	Notes
Education for Homeless Children and Youth	U.S. Department of Education	Ensure that homeless children are not left behind in school	Block Grant to States with some dollars targeted for pass through to local school districts	Department of Public Instruction		1,315,416	New changes require every school district to have a homeless liaison responsible for identifying homeless children and linking those families with assistance. (Only partial funding for this mandate is provided)
Projects for Assistance in Transition from Homelessness (PATH)	Center for Mental Health Services within Substance Abuse and Mental Health Services Administration of the U.S. Dept. of Health and Human Services	Community based services for people who are homeless or at risk of becoming homeless	Block Grant	Division of Mental Health, Development al Disabilities and Substance Abuse Services, DHHS	716,000	846,000	
Health Care for the Homeless	U. S Department of Housing and Urban Development	Primary Health Care	Competitive	Local community health centers	435,310	497,654	Funds one program in Wake, and another in Durham

In addition, mainstream services and income support programs are also critically important to the homeless population. These programs include, but are not limited to Food Stamps, Supplemental Security Income (SSI), Medicaid and Medicare, Community Services Block Grants, and Mental Health Block Grants.